

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Senate Conservatives Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00448696		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY   /   /   </div> <div>MM / DD / YYYY   /   /   </div> <div>MM / DD / YYYY   /   /   </div> </div>		
Full Name of Payee <b>Senate Conservatives Fund</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 21 / 2014		
Mailing Address PO Box 388			Amount 513.70		
City Alexandria		State VA	Zip Code 22313-0388		Transaction ID : E6EC5B9009CAD42A4BC8
Purpose of Expenditure IE-Cotton-Online Processing		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2014	
Name of Federal Candidate Thomas Cotton			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: AR
Calendar Year-To-Date Per Election for Office Sought			73749.01		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014
Full Name of Payee <b>Conservative Connector LLC</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2014		
Mailing Address 435 East Main St. Ste. 250			Amount 44500.00		
City Greenwood		State IN	Zip Code 46143-1464		Transaction ID : EA9CD83258F8E46B7929
Purpose of Expenditure IE-Cotton-Email List Rental		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2014	
Name of Federal Candidate Thomas Cotton			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> General District: _____ State: AR
Calendar Year-To-Date Per Election for Office Sought			118249.01		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input checked="" type="checkbox"/> Other (specify) ► General 2014
(a) SUBTOTAL of Itemized Independent Expenditures.....			45013.70		
(b) SUBTOTAL of Unitemized Independent Expenditures .....					
(c) TOTAL Independent Expenditures.....			45013.70		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Paul Kilgore</i>			[Electronically Filed]		Date MM / DD / YYYY 10 / 22 / 2014